PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number			
Effective December 8, 2004									10/56/290			
		CLAIMS	AS FILED -		(Column 2)		,	SMALL ENTITY TYPE		OR	OTHER SMALL I	
U.S. NATIONAL STAGE FEES			(Column),			(Coldinii 2)		RATE	FEE	7	RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LAR	GE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	200
EXAMINATION FEE			Satisfies PCT Article 33(1)-			All other situations =		EXAM. FEE			EXAM. FEE	30
SEARCH FEE			(4) = \$50 / \$100 U.S. is ISA = \$50 / \$100 ALL other countries =		ALL	\$ 100 / \$ 200 ALL other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	(10)
FEE FOR EXTRA SPEC. PGS:			\$ 200 / \$ 400 minus 100 =		/ 50 =			X \$ 125 =			⁻ X \$ 250 =	400
TOTAL CHARGEABLE CLAIMS			2/) mi	nus 20 =				X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS			100	ninus 3 =				X \$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPEN	DENT CLAIM PRI						+ \$ 180 =				,
				o, enter "C)" in co	olumn 2	ı	TOTAL		OR OR	+ \$ 360 =	(1/1)
* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL ($(\mathcal{A}(\mathcal{L}))$	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ı	X \$ 25 =		OR	X \$ 50 =	
MEN	Independent	*	Minus	***		=	ı	X \$ 100 =		OR	X \$ 200 =	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ł	+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FFF	:	OR	TOTAL ADDIT.	
		(Column 1)		(Colun	nn 2)	(Column 3)		· -·				
8 5		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	*	Minus	**		=	Ī	X \$ 25 =		OR	X \$ 50 =	
AMENDMENT	Independent	*	Minus	***		=	ľ	X \$ 100 =		OR	X \$ 200 =	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ì	+ \$ 180 =		OR	+ \$ 360 =	
							L	TOTAL ADDIT.		OR	TOTAL ADDIT. FFF	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 02/2005)

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